1996

IDAHO GROCERY CREDIT REFUND

F O	24
R M	TC2496
1,1	6-26-96

Your first name and initial	Last name			Your Social Security Number							
			ı	1			1 1		1		
If a joint return, spouse's first name and initial	Last name	S	Spouse's	S Social	Security	y Numb	er				
			1	1			1 1	ıl	l		
Address (number, street and apartment number	r)								L		
,	,										
City, Town or Post Office, State and Zip Code											
only, fown of Foot Office, state and Zip Gode											
A. INCOME											
 Enter your gross income. Include self-employment income before e rental income before expenses, ar 	xpenses, farm income l	before expenses									
security benefits or Veterans Ad	ministration disability be	enefits			1						
Enter the amount for your filing status from the filing status chart. See instructions											
 3. Compare lines 1 and 2. If line 1 is equal to or larger must file an income tax retuent of line 1 is less than line 2, 	ırn, Form 40 or 40EZ.	it use this form.	. You								
B. REFUND CLAIMED					YOUR	SELF	SPC	USE			
1. Enter the year of birth									_		
2. Check the box that applies to you	u (your spouse)										
■ Blind and under age 62 (\$15 per person)											
■ Disabled veteran under age 62 (\$15 per person)											
■ Age 62, 63 or 64 (\$15 per person)											
■ Age 65 or older (\$30 per pe	erson)	•••••									
3. Total refund claimed (CIRCLE ON	E):			\$1	5 \$	30	\$45	\$	60		
C. SIGNATURE(S) ARE REQUIRED If you or your spouse are unable representative must write "unable the signature space(s) and enter name, address and relationship.	e to sign" in	If the person person's name ture space. If spouse signs of Form 1310 mg	e and f anyo on bel	the dance of the contract the c	ate of one ner that a dece	death i n the eased	in the s survivir person	signa ng n, IRS			
Your signature					Date						
X											
Spouse's signature (if a joint return, BOTH MUS	ST SIGN)				Phon	e numb	er				

Instructions for Idaho Form 24

Who Qualifies to Use This Form

You may use this form if you were a resident of Idaho for all of 1996, you are not required to file an Idaho income tax return, and

- you (or your spouse) were 62 or older on 12/31/96, or
- you (or your spouse) are blind, or
- you (or your spouse) are a disabled American veteran of any war engaged in by the U.S., with a recognized service-connected disability of 10% or more, or a Veterans Administration nonservice-connected disability.

Filing Status Chart For Line 2				
<u>Status</u>	<u>Income</u>			
If you are Married:				
filing separate return	\$2,550			
filing jointly, both under 65				
filing jointly, one spouse 65 or older				
filing jointly, both spouses 65 or older				
If you are Single:				
■ under 65	\$6,550			
■ 65 or older	\$7,550			
If you are a Qualifying widow(er) with a depende	nt child:			
■ under 65	\$9,250			
■ 65 or older				
If you are Head of Household:				
■ under 65	\$8,450			
■ 65 or older	\$9,450			

If you are married and normally file a joint income tax return, you should file jointly on this form even though only one may qualify.

You cannot claim the grocery credit on more than one form.

Do you need help completing this form? Call or visit your nearest Tax Commission office.

Boise	(208) 334-7660	800 Park Blvd, Plaza IV
Coeur d'Alene	(208) 769-1500	1910 Northwest Blvd, Suite 100
Idaho Falls	(208) 525-7116	150 Shoup Ave, Suite 16
Lewiston	(208) 799-3491	1118 F Street
Pocatello	(208) 236-6244	611 Wilson Avenue, Suite 5
Twin Falls	(208) 736-3040	1038 Blue Lakes Blvd N, Suite C

You may also call 1-800-972-7660 toll free from Idaho, Oregon, Utah or Washington.

Hearing impaired callers: (TDD) 1-800-377-3529